

John C
LEG # 434

EPA BROWNFIELDS ASSESSMENT PROGRAM
PROJECT WORK PLAN AND GRANT APPLICATION FOR THE
DOWNTOWN BROWNFIELDS PROGRAM IN THE CITY OF AUBURN
Petroleum Substances

Fall 2010 – Spring 2013

EPA COOPERATIVE AGREEMENT # _____

July 19, 2010

Submitted by:



City of Auburn, New York
Memorial City Hall
24 South Street, Auburn, NY 13021
Michael D. Quill, Mayor
Phone: (315) 255-4104 / Fax: (315) 253-8345
Email: mayorquill@ci.auburn.ny.us

Prepared For:

US- EPA Region 2
Mr. Roch Baamonde, Chief
Grants and Contracts Management Branch
290 Broadway, 27th Floor, New York, NY 10007-1866

ENVIRONMENTAL PROTECTION
REGION 2
2010 JUL 22 11:11 AM
GRANTS & CONTRACTS
MANAGEMENT BRANCH



*Focused on being
The Best Small City in New York State*

CITY OF AUBURN

Office of Planning and Economic Development
Jennifer L. Haines, Director

July 19, 2010

Mr. Roch Baamonde, Chief
Grants and Contracts Management Branch
U.S. EPA- Region 2
290 Broadway, 27th Floor
New York, NY 10007-1866

**Re: 2009 EPA Brownfield Assessment Grant Program Application
Downtown Brownfields Program in the City of Auburn
Petroleum Substances**

Dear Mr. Baamonde:

On behalf of the City of Auburn, I am pleased to present our application for funding assistance under the US EPA Brownfield Assistance Grant Program for Petroleum Substances.

Enclosed please find for your consideration one (1) copy of the Brownfield Assessment Grant application and necessary attachments. The goal of the Downtown Brownfields Program in the City of Auburn is to identify and select potential Brownfield sites in and adjacent to the downtown urban core and conduct Phase I and Phase II ESAs. As a result of the ESAs, the City and project consultant(s) will prepare a cleanup and redevelopment plan to further the City's economic development efforts.

Thank you for the opportunity to submit this grant application. If you have any questions or require additional information, please do not hesitate to contact me at (315) 255-4115 or any of the other contacts listed in the application.

Most Sincerely,

Jennifer L. Haines, Director
Office of Planning and Economic Development

Cc: M. Quill, Mayor- City of Auburn
R. Jensen, Sr. Planner- City of Auburn
C. Selvek, Director of Capital Projects & Grants- City of Auburn
L. Green, Comptroller- City of Auburn

Enclosures

EPA BROWNFIELDS ASSESSMENT PROGRAM
PROJECT WORK PLAN AND GRANT APPLICATION FOR THE
DOWNTOWN BROWNFIELDS PROGRAM IN THE CITY OF AUBURN

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CHECKLIST OF APPLICATION ITEMS TO BE SUBMITTED

After you have completed your application, narrative descriptions, and other required forms, please review this application checklist to ensure that all required documents have been completed for submittal.

- ☒ **Key Contact Form**
- ☒ **Application for Federal Assistance (SF-424) with Original Signatures** (Including SF-424A Budget Information and Assurances for Non-Construction Programs SF-424B)
- ☒ **Itemized Budget** (Detailed)
- ☒ **Assurances: Non-Construction Programs**
- ☒ **EPA Form 4700-4 Pre-Award Compliance Review Report for All Applicants Requesting Federal Financial Assistance** (Civil Rights Form) - EEO Contact Mavis Johnson (212) 637-3339.
- ☒ **Narrative Statement / Workplan** (Including statement on how this project supports your environmental program)
- ☒ **Certification of Distribution of Application Review Package** (Proof of compliance with Intergovernmental review)
- ☒ **Data on Past Grants Experience / Financial Administration** (for applicants new to EPA REGION 2, e.g. Audit Reports, Narrative Description of Past Grants with the Federal Government, and the Federal Agency Contact for the Single Audit Requirement)
- ☐ **Biographical Sketch of the Project Manager** (for applicants other than State, local government and Indian Tribes)
- ☒ **Certification Regarding Lobbying / Disclosure of Lobbying Activities**
- ☒ **Certification of Tax Status if you are a Non-Profit or Not-for-Profit Organization** (for 501(c)(3) and (4) organizations, please attach copy of your most current IRS determination letter)
- ☐ **Negotiated Indirect Cost Rate Agreement**
- ☒ **Include the Dun and Bradstreet (D&B) Data Universal Number System (DUNS) in the SF-424 Form**

CHECKLIST OF APPLICATION ITEMS TO BE SUBMITTED
(Continued)



For other than continuing programs, please indicate below the appropriate status of your application package to assist us in facilitating the review process:



Submitting application package in response to a competitive announcement

List announcement number *EPA-OSWER-03LR-09-04* or Title *Proposal Guidelines for Brownfields Assessment Grants*



Submitting in response to discussion with EPA Staff

Please identify name _____



Submitting without input from or discussion with EPA, and not in response to a competitive announcement



Congressional Earmarks:



Submitting application package in response to a Congressional Earmark

(If known) Please identify name of Congressional Sponsor _____

(If known) Please identify the appropriation Bill in which the earmark appears _____

***NOTE:** Please note that the information contained in this application may be made available to the public unless you identify specific portions that are confidential and may not be released. Please clearly identify specific confidential business information contained in this application.

RETURN COMPLETED APPLICATION TO:

MR. ROCH BAAMONDE, CHIEF
U.S. ENVIRONMENTAL PROTECTION AGENCY, REGION 2
GRANTS AND CONTRACTS MANAGEMENT BRANCH
290 BROADWAY, 27th FLOOR
NEW YORK, NEW YORK 10007-1866



KEY CONTACTS FORM

Authorized Representative: *Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.*

Name: Mark Palessch
 Title: City Manager
 Complete Address: Memorial City Hall, 24 South Street, Auburn, NY 13021
 Phone Number: 315-255-4146

Payee: *Individual authorized to accept payments.*

Name: Lisa Green
 Title: City Comptroller
 Mail Address: Memorial City Hall, 24 South Street, Auburn, NY 13021
 Phone Number: 315-255-4138

Administrative Contact: *Individual from Sponsored Program Office to contact concerning administrative matters (i.e., indirect cost rate computation, rebudgeting requests etc.)*

Name: Christina Selvek
 Title: Director of Capital Projects and Grants
 Mailing Address: Memorial City Hall, 24 South Street, Auburn, NY 13021
 Phone Number: 315-253-5397
 FAX Number: 315-255-4735
 E-Mail Address: cselvek@ci.auburn.ny.us

Principal Investigator: *Individual responsible for the technical completion of the proposed work.*

Name: Jennifer Haines
 Title: Director, Office of Planning and Economic Development
 Mailing Address: Memorial City Hall, 24 South Street, Auburn, NY 13021
 Phone Number: 315-255-4115
 FAX Number: 315-253-0282
 E-Mail Address: jhaines@ci.auburn.ny.us
 Web URL: http://ci.auburn.ny.us/Public_Documents/AuburnNY_PPlanning/index1

Application for Federal Assistance SF-424

Version 02

*1. Type of Submission		*2. Type of Application		*If Revision, select appropriate letter(s):	
<input type="checkbox"/> Preapplication		<input checked="" type="checkbox"/> New			
<input checked="" type="checkbox"/> Application		<input type="checkbox"/> Continuation		* Other (Specify)	
<input type="checkbox"/> Changed/Corrected Application		<input type="checkbox"/> Revision			
*3. Date Received:		4. Application Identifier:			
5a. Federal Entity Identifier:		*5b. Federal Award Identifier:			
State Use Only:					
6. Date Received by State:			7. State Application Identifier:		
8. APPLICANT INFORMATION:					
* a. Legal Name: City of Auburn					
* b. Employer/Taxpayer Identification Number (EIN/TIN): 15-6000403			*c. Organizational DUNS: 077293116		
d. Address:					
*Street1: Memorial City Hall					
Street 2: 24 South Street					
*City: Auburn					
County: Cayuga					
*State: New York					
Province:					
Country: United States			*Zip/ Postal Code: 13021-3832		
e. Organizational Unit:					
Department Name: Office of Planning and Economic Development			Division Name:		
f. Name and contact information of person to be contacted on matters involving this application:					
Prefix: Mrs.		First Name: Christina			
Middle Name:					
*Last Name: Selvek					
Suffix:					
Title: Director of Capital Projects and Grants					
Organizational Affiliation: City of Auburn					
*Telephone Number: 315-253-5397			Fax Number: 315-255-4735		
*Email: cselvek@ci.auburn.ny.us					

Application for Federal Assistance SF-424

Version 02

9. Type of Applicant 1: Select Applicant Type: C. City or Township Government

Type of Applicant 2: Select Applicant Type:

- Select One -

Type of Applicant 3: Select Applicant Type:

- Select One -

*Other (specify):

*10. Name of Federal Agency:

United States Environmental Protection Agency

11. Catalog of Federal Domestic Assistance Number:

66.818

CFDA Title:

Brownfields Assessment Grants

*12. Funding Opportunity Number: EPA-OSWER-OBLR-09-04

*Title: Proposal Guidelines for Brownfields Assessment Grants

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

The City of Auburn, a small community with a population of 27,138 in 2008 (U.S. Census Bureau), is in the heart of the Finger Lakes of upstate New York. Located in Cayuga County, Auburn is the county's largest community and is considered the cultural center of the county.

*15. Descriptive Title of Applicant's Project:

Downtown Brownfields Program in the City of Auburn, New York; Petroleum Substances.

Attach supporting documents as specified in agency instructions.

Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of: Kristen Gillibrand, Charles Schumer, and Michael Arcuri

*a. Applicant
NY-024*b. Program/Project:
NY-024

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

*a. Start Date: October 1, 2010

*b. End Date: September 30, 2013

18. Estimated Funding (\$):

*a. Federal \$200,000.00

*d. Local

*b. Federal

*e. Other

*c. State

*f. Program Income

*d. Local

*g. TOTAL

\$200,000.00

***19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- ☒ a. This application was made available to the State under the Executive Order 12372 Process for review on 6/30/2010
- ☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ☐ c. Program is not covered by E.O. 12372

***20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**☐ Yes ☒ No

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

☒ **I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mr. *First Name: Mark

Middle Name:

*Last Name: Palesh

Suffix:

*Title: City Manager

*Telephone Number: 315-255-4146

Fax Number: 315-255-4735

*Email: citymanager@ci.auburn.ny.us

*Signature of Authorized Representative: *Mark Palesh*

Date Signed:

7/28/2010